A DHFS Simple Guide to Performance Measurement

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Desired Objective of this Guide

- Provide a simple Conceptual Framework of Performance Measurement

- Discuss steps and considerations for performance measurement

- Provide examples of performance measures

- Expand organizational knowledge of performance measures

Conceptual Framework

Keep It Simple

Performance measurement consists of answering two key questions:

- What am I trying to accomplish?

- How do I measure my success toward achieving my desired accomplishment?

Why Measure Performance?

- What gets measured tends to get done.

- If you don't measure results, you can't tell success from failure.

- If you can't measure success, you can't reward it or repeat it.

- If you can't recognize when results are not met, you can't learn from it.

(Source: Minnesota Milestones)

Also:

If you can't quantify or otherwise demonstrate your success, it may be difficult to justify continued resources for your efforts.

How Will Performance Measurement Help Us?

A. • Monitor and Manage Programs

B. • Inform Strategic Planning

C. • Inform Budget Process

D. • Develop Provider Expectations and Performance Contracts

E. • Help Us Be Accountable to the Public

A) Monitor and Manage Programs

- Identify desired program accomplishments (what you want to accomplish) and performance measures (measurement of progress / success).

- Monitor performance of programs over time. Are we doing better? Are our efforts working? How do our efforts compare to the performance of others?

- Identify whether the Department is achieving the expectations that the Governor, the Legislature, clients, taxpayers, and other stakeholders have for us and be able to intelligently respond to inquiries or criticism.

- Target areas that need improvement and develop action plans that will improve the performance of programs

B) Inform Strategic Planning

- Strategies can be developed to improve outcomes.

- Performance can be monitored to assess whether we are achieving our goals and strategies.

- Identify linkages with budget planning and IT planning

C) Inform Budget Process

- Provide information about the effectiveness of a program that may help determine how resources should be allocated.

- Change or redirect program activities for programs not achieving their goals.

- Expand successful programs.

- Prepare better supported budget requests.

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D) Develop Provider Expectations and Performance Contracts

• Divisions can collect performance data for individual counties or providers.

• This data can help identify counties or providers who need special attention to improve their results.

• The practices of counties or providers with good performance can be used as models that others can use to improve their results.

• Counties and providers who achieve the desired performance can be appropriately rewarded for their performance.

E) Help Us Be Accountable to the Public

• Assures the public that we are monitoring and evaluating our programs.

• Informs and educates the public on our achievements and the extent to which public resources have been wisely spent.

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What the heck is a performance measure?

A) Performance measures can be used to measure the results of many things such as:

- Programs
- Goals
- Activities
- Policies

- Strategies / Action steps
- Initiatives
- Contracts
- Etc.

B) A desirable performance measure will have present or future capacity to identify whether:

1) Action was completed or an outcome achieved
2) A timeliness standard was met, such as a required due date
3) Desired benefits were achieved

C) Performance measures can be used to measure:

Ultimate Outcome or Effectiveness
> The effect or benefit the program or activity had on persons. An outcome measure is a specific numeric indicator that measures the success of the people we are trying to help (our customers) or the environment we're trying to change (the ultimate impact that we want to have).

Examples: *Percent of Wisconsin adults who smoke. Percent of low birth weight births. Pregnancy rate among teenaged women.*

Efficiency
> The cost per person served by the program or activity.

Example: *Average cost of community placements versus institutional. Cost per special needs adoption.*

Responsiveness
> How quickly services were provided to those who needed them.

Examples: *Time from application or eligibility to service provision. Number of persons on a waiting list for a program or service. Time to complete reclassification requests.*

Process
> The extent to which program or services were delivered in the manner intended.

Examples: *Number or percent of pilot sites that have become operational. Percent of counties trained on new reporting requirements. Percent of licensing staff cross trained on facility site review procedures.*

Five Stage Approach to Performance Measurement

Stage 1 – Identify your desired accomplishments at the highest level reasonable.

Stage 2 - Identify the performance measure(s) you will use to determine if you are reaching your desired accomplishment.

Stage 3 - Obtain baseline or trend information on your performance measure(s).

Stage 4 - Obtain comparison data and set a target or standard that you are trying to reach for each performance measure.

Stage 5 – Gather and Report performance data.

Stage 1: Identify Your Desired Accomplishment

Step 1 of Stage 1)

First, be clear on how your work activities relate to a DHFS strategic plan goal. Then identify the expectations that the Governor, Legislature, service recipients, taxpayers and other stakeholders have for your efforts. Both are important to know as your desired accomplishment(s) must be congruous with them.

Examples of Expectations for a Program to Reduce the Rate of Smoking Among Adults

Legislature

    -- Reduce the rate of smoking
    -- Provide services in most cost-effective manner

Public Health Departments

    -- Provide public information and education throughout the state
    -- Serve as a source of information on what works
    -- Provide technical assistance
    -- Encourage the development of local coalitions

Health Professionals

    -- Provide public information and education throughout the state
    -- Endorse smoking cessation programs
    -- Encourage health insurance companies to provide smoking cessation benefits

Citizens

    -- Provide public information and education on what works to reduce smoking
    -- Make available resources and support
    -- Fund prevention efforts
    -- Encourage health insurance companies to provide smoking cessation benefits

Clients

    -- Provide effective services that will help clients quit smoking
    -- Make services accessible and timely
    -- Make services affordable

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Step 2 of Stage 1)

Identify the key desired accomplishment that your program is trying to achieve. Ask "Why" until you can go no further.

> Example:
> a. Staff may say that thrit desired accomplishment is to train all case managers on wrap-around services planning.
>
> Why?
>
> b. So case managers will incorporate a comprehensive wrap-around philosophy into case planning.
>
> Why?
>
> c. So that people will receive the full array of services they need and in the most efficient manner possible.
>
> Why?
>
> d. So that people are satisfied with services, have their needs met, case planning is more effective due to less risk of duplication between providers, and emergency hospitalizations decline if comprehensive needs are met in the case plan.

Step 3 of Stage 1)

> State the desired accomplishment as specifically as reasonably possible.
>
> **Examples of Desired accomplishments with varying specificity:**
>
> a. To reduce the rate of smoking among adults.
> b. To reduce the rate of smoking among adults by X percent.
> c.   To reduce the rate of smoking among adults by X percent by 200X.
>
> a.   To reduce the rate of emergency hospitalizations for persons with severe and persistent mental illness.
> b. To reduce the rate of emergency hospitalizations for persons with severe and persistent mental illness by X percent.
> c.   To reduce the rate of emergency hospitalizations for persons with severe and persistent mental illness by X percent by 200X.

What can happen if the wrong desired accomplishments are identified?

You might:

- Reward the employees who write the most citations instead of the employees whose efforts result in best safety record for nursing home patients.

- Reward the contractor who trains the most case managers instead of the contractor whose trainees best apply the case management principles taught.

- Funnel more funds toward an attractive advertising campaign that does not result in decreased births to teens in that area.

- Reward a contractor whose per client rate is slightly cheaper rather than the contractor whose efforts have actually decreased recidivism rates and therefore will have less program costs over time.

- Refer families to the most physically attractive CBRF rather than one with greater normalization activities and higher resident and family satisfaction.

- Etc.

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More Examples of Possible Human Services Desired Accomplishments

To increase the number of long-term care clients living in the community.

To reduce the number of long-term care clients living in residential care facilities.

To increase employment of persons with disabilities.

To reduce the use of alcohol among youth.

To reduce illegal drug use among youth/adults.

To reduce the rate of smoking among adults/youth.

To reduce smoking during pregnancy.

To reduce the occurrence of preventable diseases.

To reduce the occurrence of deaths due to chronic diseases.

To reduce the incidence of elevated blood levels among children.

To increase the rate of childhood immunizations.

To improve prenatal care.

To reduce the incidence of low weight births.

To reduce the infant mortality rate.

To decrease the rate of child abuse and neglect.

To decrease the occurrence of domestic abuse.

To decrease the occurrence of elder abuse.

To prevent teenage pregnancies.

To increase client satisfaction.

To reduce the rate of smoking among adults served by your program.

To increase the number of health insurance plans that provide smoking cessation benefits.

To direct X level of funding to smoking prevention efforts.

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<u>Stage 2: Identify the Performance Measure(s) You Will Use to</u>
<u>Determine if you are reaching Your Desired Accomplishment</u>

- Identifying the performance measure(s) answers the second of our two key questions: How do I measure it? The performance measure(s) you select should help you determine whether, and to what extent, you are achieving your desired accomplishment(s).

- Data on the performance measures should be currently available, reasonably attainable, or your Division may want to flag the data needed for department planning and action to develop the capacity to obtain the data.

- Example of Performance (Outcome) Measure for the desired accomplishment of: Reducing the Rate of Smoking Among Adults

  ◊ *Percent of Wisconsin Adults who Smoke.*

- Example of Performance Measure to test the outcome of a program to help adults quit smoking

  ◊ *Percent of program participants who successfully quit smoking for 1 year or longer.*

- Examples of different Performance Measures for the desired accomplishment of improving life quality by increasing the use of wrap-around service case management for people with severe and persistent mental illness (SPMI).

  ◊ *Rate of emergency hospitalizations for service recipients with severe and persistent mental illness.*
  ◊ *Rate of satisfaction among service recipients who have SPMI with their care plan*
  ◊ *Rate of case plan review that indicates that care managers are applying comprehensive wrap-around case management principles.*

Example of Performance Measure for the desired accomplishment of: Increasing the Number of Insurance Plans that Provide Smoking Cessation Benefits:

  ◊ *Percentage of Health Insurance Plans That Provide Smoking Cessation Benefits*

Examples of Performance Measures for a program to reduce youth risky sexual behavior:

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◊ *Percentage of youth program participants who tested that they understood and learned the message about the risky sexual behavior by end of 2001*

◊ *Percentage of youth program participants who are applying the message and abstaining from risky sexual behavior by end of 2002.*

◊ *Percentage of youth program participants who have not become parents by end of 2003.*

◊ *Percentage of youth program participants who have not contracted a sexually transmitted disease by end of 2003.*

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Examples of Possible Performance Measures for Human Service Desired Accomplishments

Examples of Human Service Desired Accomplishments	Examples of Possible Performance Measures
To increase the number of long-term care clients living in the community.	Number/proportion of long-term care clients living in the community.
To reduce the number of long-term care clients living in residential care facilities	Number/proportion of long-term care clients living in residential care facilities.
To increase employment of persons with disabilities.	Percent of persons with disabilities who are employed.
To reduce the use of alcohol among youth.	Percent of high school students who used alcohol in the past month.
To reduce illegal drug use among youth/adults.	Percent of youth/adults who used illegal drugs in the past month.
To reduce the rate of smoking among adults/youth.	Percent of adults/youth who smoke.
To reduce smoking during pregnancy.	Percent of women who reported they smoked during their pregnancy.
To reduce the occurrence of preventable diseases.	Incidence of the preventable disease in question.
To reduce the occurrence of deaths due to chronic diseases.	Deaths per 100,000 persons for the chronic disease in question.
To reduce the incidence of elevated blood levels among children.	Percent of children under six years of age with elevated blood levels.
To increase the rate of childhood immunizations.	Rate of completion for primary vaccinations among two-year olds.
To improve prenatal care.	Percent of pregnant women who receive prenatal care during the first trimester.
To reduce the incidence of low weight births.	Percent of births that are low weight.

Examples of Human Service Desired Accomplishments	Examples of Possible Performance Measures
To reduce the infant mortality rate.	Infant deaths per 1,000 live births.
To decrease the rate of child abuse and neglect.	Rate of child abuse and neglect per 1,000 children under 18 years of age.
To decrease the occurrence of domestic abuse.	Percent experiencing domestic abuse.
To decrease the occurrence of elder abuse.	Number of instances of elder abuse per 1,000 population age 60 years and over.
To prevent teenage pregnancies.	Number of teen pregnancies per 1,000 females in the age group.
To increase client satisfaction.	Percent of persons reporting satisfaction with the program or service.

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<u>Stage 3: Obtain Baseline or Trend Information on Your Performance Measure(s)</u>

- Collect trend information.

- Example of Baseline and Trend Information for the performance measure of Percent of Wisconsin Adults who Smoke

1990	25%
1991	26%
1992	23%
1993	22%
1994	23%
1995	22%
1996	25%
1997	23%
1998	23%
1999	24%

- Hypothetical example of trend data for the performance measure of percentage of health insurance plans which provide smoking cessation benefits:

1995	27%
1996	35%
1997	48%
1998	45%
1999	54%

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Stage 4:

<u>Obtain Comparison Data and Set a Target or Standard That You Are Trying to Reach for Each Performance Measure</u>

- Obtain and consider comparison data (if available) on other states, the U.S. as a whole, etc., in setting your target. For example, here is U.S. data on Adults Who Smoke:

1990	26%
1991	26%
1992	27%
1993	25%
1994	26%
1995	25%
1996	24%
1997	23%
1998	23%

- Consider your baseline/trend data in setting your target.

- Example of a Target for the performance measure of Wisconsin Adults Who Smoke: Less than 20%

Stage 5: Gather and Report Performance Data

<u>Gather Data That is Available or May Be Needed for your Performance Measure</u>

- Identify the data you are currently collecting for your program.
    - e.g.
    - -- Federal reporting requirements
    - -- Quality assurance activities
    - -- Regulatory activities
    - -- County/provider reporting
    - -- Existing information systems.

- Determine the reliability of your data

    - -- Is the data accurate?
    - -- Is it reported consistently?

- Determine what additional data may be needed

    - -- Can this data be gathered in a cost effective manner?
    - -- Will it be accurate?
    - -- Will it be reported consistently?
    - -- Are department efforts needed to make the data available?
    - If yes, your Division Administrator should be aware of data gaps for ongoing planning efforts and linkage with IT planning.

<u>Display the data</u>

- Display the data in a simple, easy to understand manner.

- Compare current performance to baseline or trend data and to comparison data.

- Compare current performance to your target/standard.

Examples for Reporting Performance Data

Desired accomplishment: To Reduce the Rate of Smoking Among Adults

Performance Measure: <u>Percent of Wisconsin Adults Who Smoke</u>

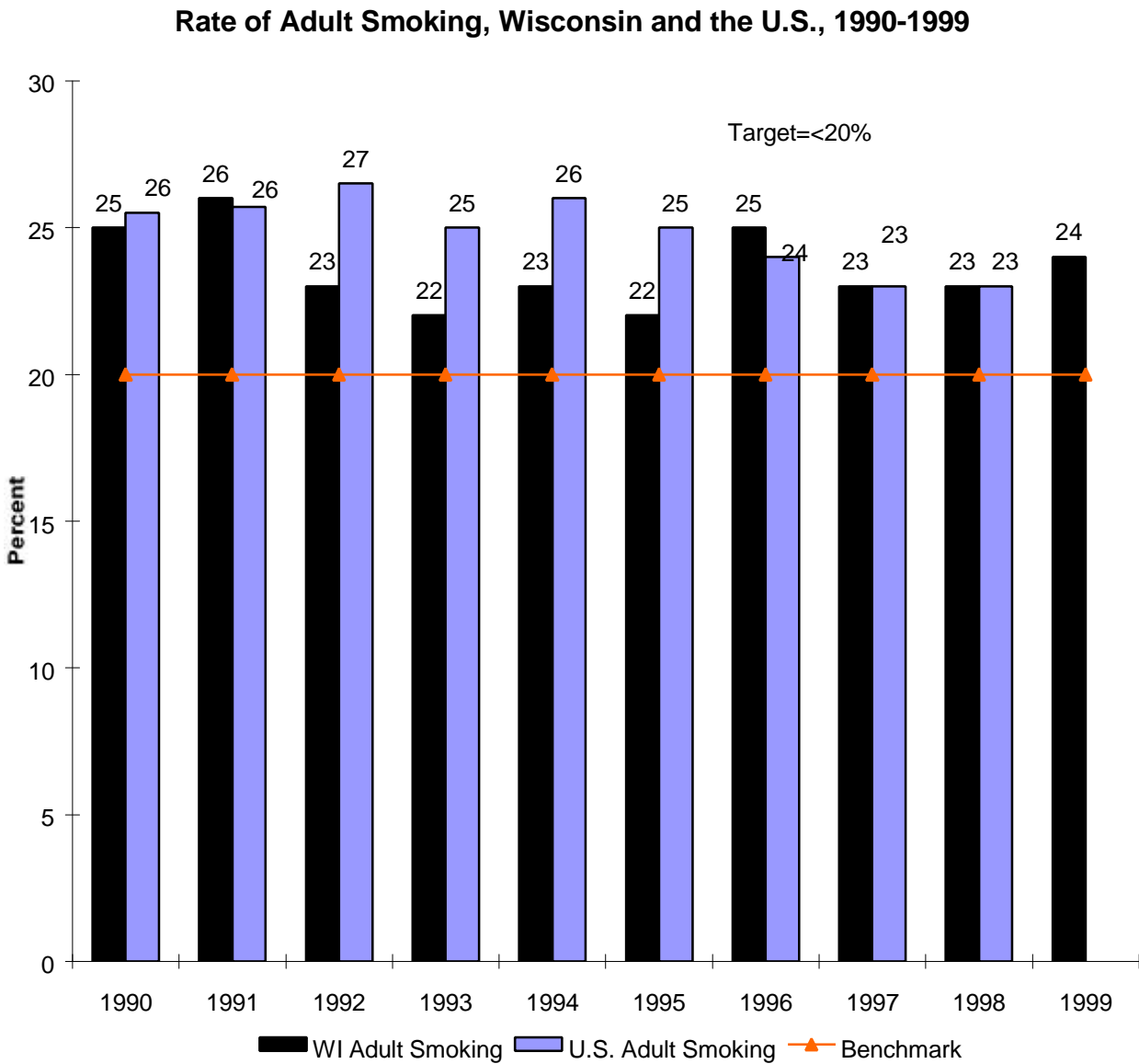| Year	Percent of Wisconsin Adults Who Smoke	Percent of US Adults Who Smoke
1990 Actual	25%	26%
1991 Actual	26%	26%
1992 Actual	23%	27%
1993 Actual	22%	25%
1994 Actual	23%	26%
1995 Actual	22%	25%
1996 Actual	25%	24%
1997 Actual	23%	23%
1998 Actual	23%	23%
1999 Actual	24%	
2000 Estimated	24%	
2001 Estimated	23%	
2002 Estimated	23%	
2003 Estimated	22%	

Target = Less than 20%.

Desired accomplishment: To Increase Insurance Plans with smoking Cessation Benefits

Hypothetical Performance Measure: <u>Percentage of Health Insurance Plans That Provide Smoking Cessation Benefits</u>

Year	Percent of Wisconsin Health Insurance Plans Providing Smoking Cessation Benefits	Percent of US Health Insurance Plans Providing Smoking Cessation Benefits
1995 Actual	27%	24%
1996 Actual	35%	28%
1997 Actual	48%	31%
1998 Actual	45%	36%
1999 Actual	54%	49%
2000 Estimated	60%	
2001 Estimated	65%	
2002 Estimated	70%	
2003 Estimated	75%	

Target for 2005 = 85%

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Example for Presenting Performance Data

Rate of Adult Smoking, Wisconsin and the U.S., 1990-1999

Target=<20%

WI Adult Smoking values: 1990: 25, 1991: 26, 1992: 23, 1993: 22, 1994: 23, 1995: 22, 1996: 25, 1997: 23, 1998: 23, 1999: 24

U.S. Adult Smoking values: 1990: 26, 1991: 26, 1992: 27, 1993: 25, 1994: 26, 1995: 25, 1996: 24, 1997: 23, 1998: 23

Legend: WI Adult Smoking, U.S. Adult Smoking, Benchmark

Hypothetical Example for Presenting Performance Data

Percent of Wisconsin Health Insurance Plans Providing Smoking Cessation Benefits, Wisconsin and U.S., 1995-1999

Target for 2005 = 85%

Year	Wisconsin	US
1995	27%	24%
1996	35%	28%
1997	48%	31%
1998	45%	36%
1999	54%	49%

■ Wisconsin   ■ US